



Department of Public Safety and Correctional Services

Office of the Secretary

300 E. JOPPA ROAD • SUITE 1000 • TOWSON, MARYLAND 21286-3020
(410) 339-5000 • FAX (410) 339-4240 • TOLL FREE (877) 379-8636 • V/TTY (800) 735-2258 • www.dpscs.state.md.us

January 26, 2004

STATE OF MARYLAND

ROBERT L. EHRLICH, JR.
GOVERNOR

MICHAEL S. STEELE
LT. GOVERNOR

MARY ANN SAAR
SECRETARY

G. LAWRENCE FRANKLIN
DEPUTY SECRETARY

MARY L. LIVERS, PH.D.
DEPUTY SECRETARY

DIVISION OF CORRECTION

DIVISION OF PAROLE AND
PROBATION

DIVISION OF PRETRIAL
DETENTION AND SERVICES

PATUXENT INSTITUTION

MARYLAND COMMISSION
ON CORRECTIONAL
STANDARDS

CORRECTIONAL TRAINING
COMMISSION

POLICE TRAINING
COMMISSION

MARYLAND PAROLE
COMMISSION

CRIMINAL INJURIES
COMPENSATION BOARD

EMERGENCY NUMBER
SYSTEMS BOARD

SUNDRY CLAIMS BOARD

INMATE GRIEVANCE OFFICE

The Honorable Joan Cadden
Chair
Subcommittee on Public Safety and Administration
213 Lowe House Office Building
Annapolis, Maryland 21401-1991

RE: Department of Public Safety and Correctional Services Fiscal 2005 Budget
Overview - Response to Issues

Dear Delegate Cadden:

Attached for your information is the Department's discussion pertaining to issues in the Department of Public Safety and Correctional Services Fiscal 2005 Budget Overview analysis.

I hope this information is responsive to the issues and concerns that were raised by the analyst. My sincere thanks to you and the Subcommittee for your ongoing interest in and continuing support for the Department of Public Safety and Correctional Services. I welcome the opportunity to provide additional information and assistance should you have any questions with respect to this issue.

Sincerely,

Mary Ann Saar
Secretary

c: G. Lawrence Franklin, Deputy Secretary for Administration, DPSCS
Mary L. Livers, Ph.D., Deputy Secretary for Operations, DPSCS
Rhea Harris, Director of Legislative Affairs, DPSCS
Diane Lucas, Budget Analyst, Division of Budget Analysis, DBM
Susan Dooley, Director of Financial Services, DPSCS

POST ANALYSIS ISSUES

ISSUE: DLS recommends that the General Assembly instruct the Office of Policy Analysis to procure a vendor and conduct a post evaluation of DPSCS facilities.

DEPARTMENT RESPONSE:

The Department does not concur with the Analyst's recommendation. For the purpose of clarification, three items are addressed. First, staff from the National Institute of Corrections did not train staff in Maryland to conduct the post analysis. The National Institute of Corrections funded a technical assistance grant for the post analysis. The technical assistance grant provided funding for two outside correctional consultants who trained the staff within the Department of Public Safety and Correctional Services. Second, the study covered the utilization of Correctional Officers I-III's, which does include the rank of sergeant, and it was a post analysis not a staffing analysis.

Lastly, there is a need to have a clear understanding of terminology. A post is an assignment within an institution that is determined to be necessary for the safe and secure operation of the facility. Posts may be designated as either 7,6,5,4,3,2 or 1 day posts depending on the need for a particular function. Each post, therefore, will require a varying number of full time employees, also known as PINs - personnel identification numbers (this translates to staffing), for appropriate coverage to carry out the necessary function. To further explain, and for purposes of illustration, to adequately staff one 7-day post, approximately 5.1 PINs are required. The post analysis recommended the reallocation of 218 PINs, not posts. PINS should not be confused with posts.

Reference is made to differences in the 2003 analysis and the 1998 and 2002 studies. The reason for the marked differences in all three studies is that each study is inherently different. The three studies cannot be compared because they are dissimilar in purpose and methodology.

As part of the 1998 Joint Chairmen's Report request, the Department conducted an assessment to evaluate staffing levels and unmet staffing needs. This was essentially an overtime study, whose focus was to examine the methods utilized in the automated system that accounts for the use of overtime and assists in calculating the relief factors for each facility. This assessment method was based on a Secretary's Directive (01-97), which provided a method for determining the number of custody staff members necessary in a facility by using an automated program. The automated program, Staffing Analysis and Overtime Manager System (SAOMS) is a reporting system that records events and can be used to analyze data. The SAOMS uses the necessary staffing requirements established by the facilities and annual available working days and has no role in the determination of the need for a post. Consultants funded through a technical assistance grant from the National Institute of Corrections did evaluate the SAOMS and found it to be the model on which other correctional departments should base their operations with regard to the evaluation and management of overtime. The department plans to continue to make improvements to the SAOMS and continue to use it as a management tool.

In addition, the Department hired two outside consultants in 2001 to perform a staffing and functional analysis for the Division of Correction's Central Office. The consultants (K. McKellar and G. Vose) were part of a technical assistance request to the National Institute of Corrections. This assessment did not evaluate the staffing levels or posts within the Division's facilities. The consultants evaluated **only** the performance of the Central office to meet the needs of the increasing number of inmates in the Division's facilities.

The Department of Public Safety and Correctional Services takes exception to the statement that “within the span of 10 months the department has uncovered a staffing error.... suggests that the reliability of the new numbers may be limited.” While it is true that the department testified last session that it needed more correctional officers, it should be noted that this request was predicated on the assumption that the staffing plans that were in effect were valid and necessary to the safe and orderly operation of the institutions. It should also be noted that a National Institute of Corrections Report recommended that the department consider doing a post-by-post staffing analysis. Upon discovery that a post-by-post analysis had not been done in the recent history of the department, the decision was made to conduct such a study to ensure that the posts being manned were in fact necessary for the safe and orderly operation of the facilities. The department stands behind the reliability and methodology of the study, and the professional expertise represented by the staffing analysis team members. With regard to the recommendation that the General Assembly instruct the Office of Policy Analysis to procure a vendor and conduct a post evaluation of DPSCS facilities, the department respectfully disagrees. This effort would not only be costly and redundant, but would serve no legitimate purpose at this juncture.

It was stated that the driving force of the 2003 staffing (post) analysis “appears to be the its desire to change the custody focus from a system of confinement and control to one of rehabilitation and treatment.” The driving force behind the 2003 post analysis was to address the concerns of the Legislative committees expressed in the 2003 session and ensure our facilities were operating efficiently. Being good stewards of the taxpayer’s monies requires continuous evaluation of our mission, and how to best meet our mission. The responsible utilization of resources is paramount in meeting our responsibilities to our citizens. The department disagrees with the statement that “this significant shift away from the state’s traditional correctional focus, while laudable, may be ill timed given the current fiscal condition.” We believe the contrary to be true. We believe that during these challenging fiscal times, it is even more important to find better, more efficient and effective ways to conduct our business practices.

**RESTART (REENTRY ENFORCEMENT SERVICES TARGETING ADDICTIONS,
REHABILITATION AND TREATMENT)**

ISSUE: The department should be prepared to discuss its current use of programs and the adequacy of the programs, including its offender workforce goals. DLS recommends that budget language be added that prohibit expenditure of general funds for any of the components of project RESTART until an implementation and operation plan has been submitted to the General Assembly.

DEPARTMENT RESPONSE:

RESTART represents the conceptual framework which describes a correctional system focusing on control and custody and rehabilitation and treatment.

Cost Benefit Analysis

As presented in the description of RESTART, the major outcome of this initiative is a reduction in recidivism. A theoretical example of the benefits of this initiative is as follows:

Assumptions

- Yearly intakes – 14,000
- Three year return rate stays constant
- One percent recidivism reduction each year
- Number of years covered – 10
- Average length of stay – 2 years
- Construction completed in year 9
- Population growth can be absorbed in nonconventional housing and currently proposed construction

Reduction in Returns Over 10 Years										
(Assumes Intake and Release Patterns and 3 Year Return Rate Stay Constant)										
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Total Intake	14,000	14,000	14,000	14,000	14,000	14,000	14,000	14,000	14,000	14,000
Number Returning to DOC within 3 Years of Release	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000
1% Reduction Each Year	40	80	120	160	200	240	280	320	360	400
Cumulative Reduction	1.0%	2.0%	3.0%	4.0%	5.0%	6.0%	7.0%	8.0%	9.0%	10.0%
2 Year Average Length of Stay Cumulative Bed Impact	80	160	240	320	400	480	560	640	720	800

Explanation

Based upon the above-stated assumption of a ten-year period, the addition of 800 beds would be avoided. The dollar savings after ten years would be approximately \$40 million in operations costs and \$140 million in capital construction costs (excluding interest). The total cost of Project RESTART for a ten-year period would be approximately \$92 million.

Conclusion

In summary, for an investment of \$92 million over a ten-year period, the State would avoid expenditures for the same period of \$180 million and an additional savings of \$40 million ongoing operating costs from year eleven on.

Current Programs and Services

The following tables present the current services provided to inmates and the summary of additional resources required for RESTART are presented in the Tables on the following pages

SERVICES PROVIDED TO INMATES FISCAL YEAR 2005 BASE BUDGET

DESCRIPTION	FTE	PINS	SALARIES	OPERATING	TOTAL
<i>EDUCATION:</i>					
Educational Contracts				734,321	734,321
Project Restart ^	26.0			1,200,000	1,200,000
Educational Liaison		1.0	80,028		80,028
	26.0	1.0	80,028	1,934,321	2,014,349
<i>SUBSTANCE ABUSE ASSESSMENT AND TREATMENT:</i>					
Residential Substance Abuse Treatment Prog	29.1			1,258,516	1,258,516
Regimented Offender Treatment Center	8.0			246,767	246,767
Women's Intensive Treatment Program	3.0			127,912	127,912
Acupuncture Treatment Programs	9.0			288,643	288,643
Therapeutic Community ^				1,500,000	1,500,000
Assessments ^				400,000	400,000
Addictions Counselors		16.0	627,831		627,831
	49.1	16.0	627,831	3,821,838	4,449,669
<i>REENTRY PROGRAM:</i>					
Serious and Violent Offender Reentry Initiative				700,000	700,000
	-	-	-	700,000	700,000
<i>SOCIAL WORK PROGRAM:</i>					
Social Worker		32.0	1,400,001		1,400,001
Social Work Associates		7.0	281,702		281,702
Supervisors (in O/S)		7.0	375,052		375,052
	-	46.0	2,056,754	-	2,056,754
<i>CASE MANAGEMENT:</i>					
Case Management Spec		289.0	11,785,454		11,785,454
	-	289.0	11,785,454	-	11,785,454
TOTAL FY 2005 ALLOWANCE	75.1	352.0	14,550,067	6,456,159	21,006,226

	GENERAL FUNDS	SPECIAL FUNDS	FEDERAL FUNDS	REIMB FUNDS	TOTAL FUNDS
<i>EDUCATION:</i>	1,280,028	734,321	-	-	2,014,349
<i>SUBSTANCE ABUSE ASSESSMENT AND TREATMENT:</i>	3,068,683	122,470	-	1,258,516	4,449,669
<i>REENTRY PROGRAM:</i>	-	-	700,000	-	700,000
<i>SOCIAL WORK PROGRAM:</i>	2,056,754	-	-	-	2,056,754
<i>CASE MANAGEMENT:</i>	11,785,454	-	-	-	11,785,454
TOTAL FY 2005 ALLOWANCE BY FUND	18,190,919	856,791	700,000	1,258,516	21,006,226

^ Additional funding provided in the FY 2005 allowance

The base funding prior to inclusion of the additional funding was \$17,006,226 (\$15,090,919 in general funds).

RESOURCES FOR RESTART

CLASSIFICATION TITLE	NO. of POSITIONS	SALARY COST
<i>EDUCATION:</i>		
Teachers	26.0	1,248,000
<i>SUBSTANCE ABUSE ASSESSMENT AND TREATMENT:</i>		
Assessors	9.0	329,652
Addictions Counselors	27.0	1,215,783
Supervisors	7.0	343,119
	43.0	1,888,554
<i>SOCIAL WORK PROGRAM:</i>		
Social Worker	38.0	1,485,610
Social Work Supervisor	3.0	147,051
Office Secretary	8.0	212,096
	49.0	1,844,757
<i>THERAPEUTIC COMMUNITY:</i>		
Social Workers & Addictions Couns	38.0	1,485,610
Assessors	1.0	36,628
Program Director	1.0	54,277
	40.0	1,576,515
<i>CASE MANAGEMENT:</i>		
Case Management Spec	10.0	366,280
<i>TRANSITIONAL COORDINATORS:</i>		
Transitional Coordinators	27.0	763,317
STAFFING REQUIREMENTS	195.0	7,687,423
OPERATING COST REQUIREMENTS *		1,508,900
ESTIMATED TOTAL ANNUAL COST		9,196,323

*Operating costs include furniture and equipment, telephone service charges, travel and required training, office supplies and educational materials.

Operational Plan for RESTART

I. Front End Assessment

All Populations – On intake into a reception facility, each inmate will be **screened** to determine the medical, mental health, educational, substance abuse treatment needs and level of criminality. Assessment for medical issues will always be completed at the reception facility as well. The screening will be used to determine who requires additional **assessment** in each of the other areas. Assessments will be completed as required at either the reception facility or the maintaining facility depending on the allowance of time prior to movement of the inmates to the maintaining facility. The assessment results will indicate an inmate's amenability to treatment, level of treatment needed, and can be utilized to create the case plan for each inmate.

Front End Assessment will occur at MRDCC and MCIW, the two current intake facilities, to capture information on all new intakes. However, screening and assessment of the standing population is also planned to create treatment group rosters for those in the current population who are within their last 10-12 months of release

II. Inmate Orientation

All Populations -- Upon arrival at the designated maintaining facility, each inmate receives an orientation by his/her assigned Division of Correction Case Manager. During the orientation, the inmate receives information regarding programs and services available at the facility, in addition to information about how to comply with program plans, how to communicate with case managers, and any sanctions for failure to comply. Inmates will also be informed of media tools that will be available to them during their incarceration. These tools – instructional videos, kiosks, and service provider databases – will complement the array of programming that will be provided to the inmates in preparation for release. Topical and service provider **videos** will be aired regularly, (reception areas, recreation rooms, and closed circuit television) with schedules posted in location where inmates frequent. **Kiosks** containing service provider information will be placed in strategic locations where inmates frequent (housing units, day rooms, multipurpose rooms and libraries). The United Way's First Call for Help (UWFCH) *database* will be installed onto computers in prison libraries, enabling inmates to identify "offender friendly service providers in the jurisdictions to which they are returning.

III. Institutional Case Plans

After the orientation, an institutional case plan, based upon the screening and assessment process, will be developed for each inmate. The institutional case plan will be used to match offenders to available programs and services based upon identified needs.

General population -- Case Managers are responsible for the management of inmates during incarceration. This process has several components, including providing crisis intervention; establishing a rapport with the client; making appropriate referrals for specialized assessments in the form of an institutional case plan that matches available resources and services to the inmate's identified needs; and monitoring and evaluating the inmate's progress in programs and the effectiveness of interventions.

This case management process will be facilitated through monthly-face-to-face contact with each inmate on the assigned caseload. The case manager must determine if the inmate has

received the services outlined in the institutional case plan and whether that inmate has benefited from those services. The Case Manager will make regular entries into the inmate client file to document contact with the inmates and progress in the programs and services assigned through the institutional case plan.

Formal Case Manager-to-inmate ratios have been developed to facilitate effective caseload monitoring. The ratios are as follows -- 50-75 inmates per Case Manager in pre-release facilities; 76-100 inmates per Case Manager in minimum-security facilities; 101-125 inmates per Case Manager in medium security facilities; and 126-150 inmates per Case Manager maximum-security facilities. Lower case load ratios in lower security facilities will enable the case managers to assist the inmates as they prepare to transition from prison to the community, but will enable them to effectively implement an effective case management model.

Special Population – Social workers will serve the special population inmates. These staff will be responsible for providing comprehensive case management and support to inmates throughout the incarceration period, beginning with the development of an institutional case plan.

IV. Education and Vocation Programs

All Populations -- Referrals for education and vocational training programs can come from either a case manager or social worker. There is currently a waiting list of 600 inmates to access vocational training programs. Under RESTART, an additional 350 vocational training slots will be available.

There is currently a waiting list of 1,200 inmates to access education programs. These programs include basic literacy, basic education, and GED and will be made available during daytime and evening hours. An additional 1,200 education slots will be available.

Resources provided under RESTART will not only significantly reduce the waiting lists, but also teachers will be able to better accommodate new offenders entering the system.

V. Substance Abuse Treatment Services

All Populations -- Substance Abuse Treatment will move forward in two directions – assessment and counseling. Assessors will determine the level of addiction and amenability to treatment. From that information the assessors will determine the appropriate level of treatment services. The counselors will offer group and individual counseling “behind the wire” for those inmates that are referred by the assessors. Inmates who require more intensive substance abuse treatment services will be referred to one of the Department's Modified Therapeutic Communities (TC). In addition, \$1.5 million was included in the FY '05 budget by the Governor to support the development of two additional Modified Therapeutic Communities. With the additional dollars the Department will have a total of five Modified Therapeutic Communities. These resources will add an additional 2,940 treatment slots annually.

VI. Re-Entry Classes

General Population -- A full program of re-entry services, to prepare the offenders for release will be made available. The five-prong program will be offered over 125 hours and includes cognitive restructuring classes, anger management classes, employment readiness classes,

victim offender impact classes, and community resources information. Programs will be offered to inmates within 4 months of release.

Under RESTART, 1,620 slots will be made available. Using funding reallocated from a federal re-entry grant, we will prioritize those institutions that release two hundred or more inmates annually (a total of 10), supporting these program slots. Program implementation is scheduled for March 2004. Eventually, these programs will be offered in every institution

VII. Cognitive Groups

Special Populations -- Social workers and psychologists will conduct cognitive restructuring and other need-based group therapy sessions. These group sessions include introductory and more advanced levels of cognitive restructuring sessions and other therapies such as anger management, medication management, social skill development and problem solving skills according to the assessed needs of the inmates. In addition, these inmates will have access to the same community resource information as the general population inmates. These group sessions are currently in existence in the institutions. With the additional RESTART resources, we expect to increase the number of inmates receiving this programming by 3,690.

VIII. Conditions of Release and Agent Assignment

Pilot -- A pilot project to identify and assign Parole Agents to inmates (from both the general and special population) prior to release has been developed. For those inmates approved for parole release by the Maryland Parole Commission, the Case Managers will be able to review conditions of release. These conditions will be used by the Transition Coordinators and Social Workers to develop discharge plans for those inmates. Under the pilot program, the Division of Parole and Probation (DPP) will assign Agents to those inmates returning to Baltimore City under parole supervision, prior to release.

IX. Discharge Plan Development

General Population – The Transition Coordinator will develop discharge plans for general population inmates prior to release. Within 120 days of release, the Transition Coordinator will review the previously administered screenings and assessments, the institutional case plans, and case file entries for each assigned inmate. This review will inform the Transition Coordinator of not only the inmates' needs and services received, but also assist with determining needs that may exist upon release. Also information will be gathered through inmate interviews and imposed conditions of release (where applicable) to determine post release needs. The Transition Coordinator will use information from all of these sources to develop discharge plans. The discharge plans will link inmates to an array of services that many will need upon release, such as identification, transitional housing, employment training and placement, and family support services.

In addition, the Transition Coordinator will serve as a liaison between the Division of Correction and the service provider community. The Transition Coordinator will attend community meetings/trainings/workshops with community providers to facilitate partnerships and resource development.

Special Populations – Special Populations – The Social Work unit will develop discharge plans for special population inmates prior to release. Many inmates being released are mentally ill and require connection to services in the community to continue their ability to function without decompensation. Expanded social work services will enable discharge plans for all inmates in

these special populations to be developed so as to ensure the availability of services for continued care in the community. Discharge plans will coordinate the services provided during incarceration in conjunction with the inmates' assessed needs and services provided through community service provider networks.

All Populations -- The Transition Coordinator or Social Worker will share a copy of the proposed discharge plan with the assigned DPP agent and community resource providers identified in the plan. Both the community resource provider and the DPP Agent will have an opportunity to review the discharge plans and provide feedback to the Transition Coordinator and Social Worker regarding the plan if necessary. This process will ensure that the discharge plan "follows" the inmate from prison to the community, but that the "handoff" from the DOC to DPP is a smooth one.

X. Exit Orientations

All Populations -- Through the Exit Orientation community service provider and agencies are able to meet inmates, within 30 days prior to release. In addition, providers will be able to share information about services that will be available to inmates upon release. Mini focus groups were held with a group of providers from five jurisdictions in January 2004 to get additional input on how to strengthen this component.

XI. Discharge Plan Review

All Populations-- The Transition Coordinator or Social Worker will meet with inmates within at least seven days of release to review the discharge plan, ensuring that post-release needs have been addressed and making modifications where necessary. For example, if the housing placement previously included in the discharge plan is no longer valid, at this time, the Transition Coordinator or Social Worker will be able to identify another housing opportunity prior to release. This review also provides an opportunity for the inmate to have any questions that he/she may have about the discharge plan addressed.

XII. Service Provider Follow-up

Many service provider agencies and organizations track services provided, however, hardly any provide feedback information to the Division of Correction and other referral sources. Arrangements are being made for community service providers to provide feedback and verify if inmates are actually receiving services identified in the discharge plan, upon release. Mini focus groups were held with a group of providers from five jurisdictions in January 2004 to get additional input on how to strengthen this component.

XIII. Attachments

Attached is a Flow Chart which graphically depicts the operational plan for RESTART. Also attached is a Glossary of Terms.

Recruitment issues

Addictions

There are multiple issues that must be overcome in order to ensure an adequate supply of qualified addictions treatment personnel. The licensing requirements of the Alcohol and Drug Abuse Administration (ADAA) have had a drastic impact on addictions counselor availability. Additionally, the Department's historical policy relating to the hiring of persons with an addictions or criminal history limit the availability of candidates. In order to address the issue of addictions counselor availability the Department intends to adopt the following strategy:

- 1) Privatization of Therapeutic Community treatment programs. The Department has experimented with its most recent therapeutic community at the Metropolitan Transition Center, the Intensive Treatment Program (ITP) by utilizing a private provider for the treatment services. The program has proven to be successful in terms of maintaining staff levels, delivering quality services, and providing a connection to treatment services in the community. Such privatization takes the State out of the employment business.
- 2) Separation of the assessment and counseling function. The State intends to utilize two levels of addictions counselors: assessors to assess addiction levels, determine program placement, and work on discharge plans for inmates re-entering the community; and counselors to provide actual treatment services. Under ADAA standards, only the counselors require licensure. By establishing the assessor position as an entry level position, the Department is hopeful of attracting those counselors working toward licensure who are generally unable to obtain employment elsewhere, and grooming a workforce for the positions that require a license.
- 3) Modification of Departmental hiring criteria. The Department intends to examine hiring criteria relating to past drug use and conviction history for drug treatment positions. That is not to say that the Department intends to allow all applicants employment without regard to history, but rather that the Department intends to adopt a case by case consideration of applicants. Modifications of COMAR regulations may be required for this change of policy.
- 4) Geographical phase in. The Department intends to phase in the addiction counseling program starting in the Hagerstown region. The Department's assessment of available employment opportunities reflects that the Hagerstown region draws professional employees without competition from the Baltimore – Washington area catchment area.

Social Work

Licensing requirements applicable to social workers has had an impact on available applicants. However, there has been a steady stream of candidates for existing positions and turnover has not been great since the ASR reclassified the social work continuum in corrections. Nevertheless, the Department has a two-fold strategy to ensure the availability of candidates:

- 1) Phase in strategy. The Department has an established corps of social workers providing services at many institutions. The employment strategy will be to fill voids in the deployment. For example, there are currently no social workers assigned to any pre-release facility (even though one of the primary social work functions is to provide discharge planning). After voids are filled, the next phase of employment will focus on a single geographical region at a time to meet the demand for special needs services where it is most acute.

2) Bifurcation of job function. To the extent that vacancies cannot be filled due to a lack of qualified licensed candidates, the Department is prepared to bifurcate the job function to separate those functions requiring licensure from those that do not. For example, while counseling requires licensure, the preparation of a discharge plan does not. The hiring of qualified candidates working toward licensure will help to establish a workforce capable of meeting the position demands while remaining consistent with licensing requirements.

Education

The RESTART supplementation of the correctional education program is intended to establish a night school program through contractual employees. Utilizing the community colleges in the counties where facilities are located, teachers seeking secondary employment will be hired. Past experience and representations from MSDE suggests that there will be no difficulty in hiring these part-time, evening teachers to make a "night school" work.

Case Managers and Transition Coordinators

Will be recruited internally where possible. There have been numerous expressions of interest by correctional officers.

Implementation Plan

Individual program services support through grants funding will begin in March 2004. It is anticipated that we will be able to begin implementation of front end assessment starting in July 2004. The remaining components of RESTART will be implemented upon funding availability through the attrition of excess correctional officer positions.

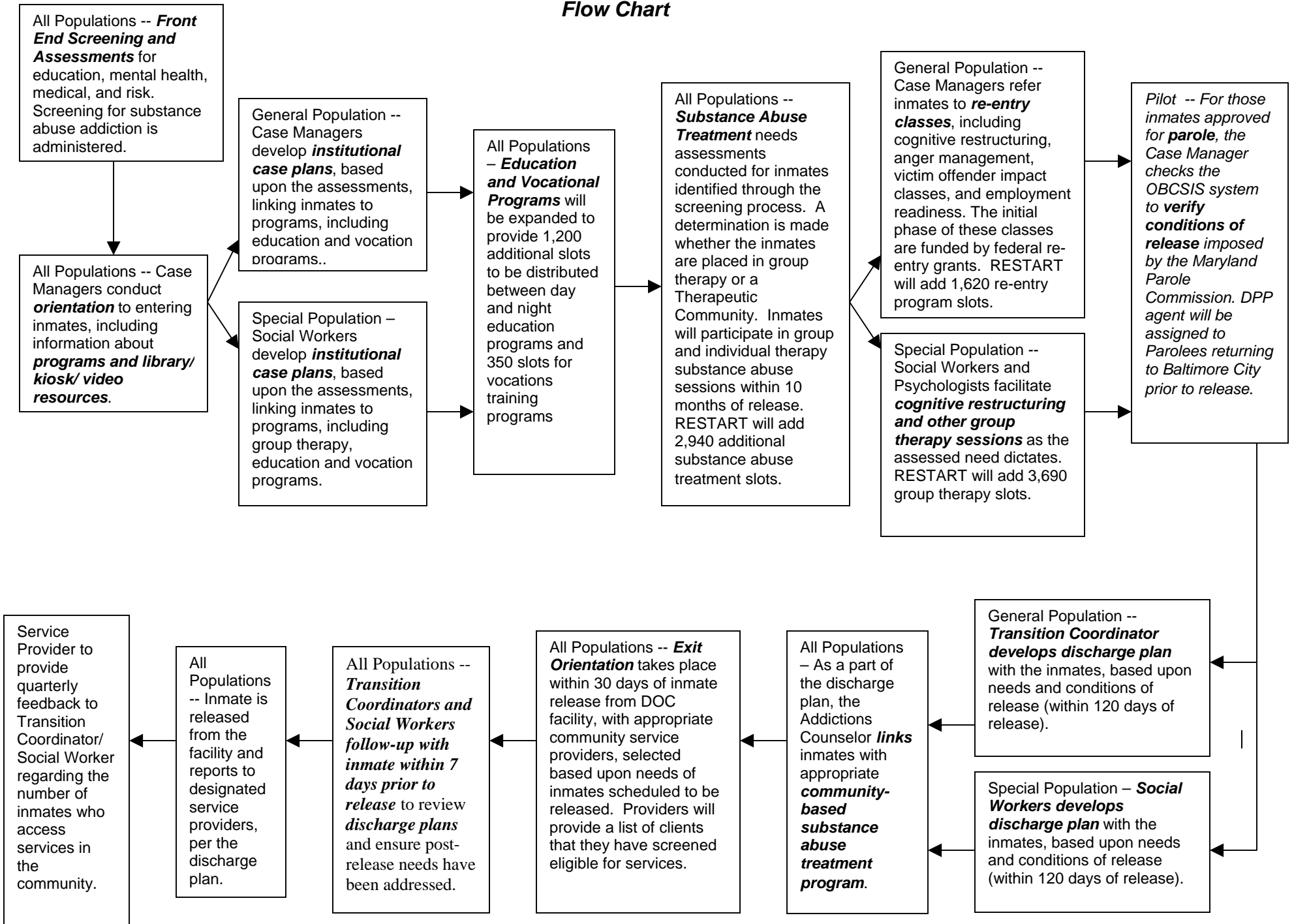
NONVIOLENT DRUG OFFENDERS

ISSUE: The department should be prepared to discuss the impact of the nonviolent drug offenders on the inmate and intake populations.

DEPARTMENT RESPONSE:

In FY 2003, the Division of Correction received approximately 5,000 new court commitments with a drug conviction as their most serious offense out of a total of approximately 11,700 new court commitments. As of July 2003, 5,477 inmates in the Division of Correction had a drug conviction as their most serious offense. In addition, the Division of Parole and Probation received approximately 14,000 probation intakes with a drug conviction as their most serious offense out of a total of approximately 42,000 new probation intakes in FY 2003.

RESTART Flow Chart



RESTART Flow Chart

Glossary of Terms

All population Inmates – any individual incarcerated in a Division of Correction facility.

Case Manager – individual responsible for linking general population inmates to appropriate interventions, and monitoring and evaluating the inmates' progress and effectiveness of the interventions.

Cognitive Restructuring – The process of helping individuals identify thought processes that lead to unlawful actions and behavior and in a methodical way teaching them to think differently.

Discharge Plan – a plan linking inmates to services that will be available upon release.

Exit Orientation – a forum for community service providers to meet with inmates prior to release and share detailed information about services that will be available to them upon release.

Front End Assessment – The process of screening and further investigating or assessing to determine the needs of the inmate intake population in the five major treatment areas: medical, mental health, education, substance abuse, and criminality.

General Population Inmates – inmates who have not been identified as those who are sex offenders, elderly or have chronic diseases or conditions – HIV/AIDS, kidney dialysis, mental illness, and early senility.

Institutional case plan – plan that includes interventions (services and programs) to inmates during incarceration, based upon identified needs.

Kiosks – stands that will be used display information provided by community service providers.

Social Worker -- individual responsible for linking special population inmates to appropriate interventions, and monitoring and evaluating the inmate's progress and effectiveness of the interventions.

Special Population Inmates - those who are sex offenders, elderly or have chronic diseases or conditions – HIV/AIDS, kidney dialysis, mental illness, and early senility.

Therapeutic Communities (TC)s are drug-free residential settings with levels of treatment that reflect increased responsibility. TCs are different from other treatment approaches because they rely heavily on the "community" to bring about change in the residents, not just counselors. The community consists of treatment staff and the participants, who interact in structured and unstructured ways to influence attitudes, perceptions and behavior associated with drug use. Pro-social peer influence is mediated through a variety of group process activities and individual relationships. The Department of Public Safety and Correctional Services modifies the program slightly. TCs typically allow for one resident at a higher level to have authority over another. This is not permissible within prison institutions; one inmate cannot have authority over the other.

Transition Coordinator—an individual responsible for developing discharge plans for inmates, prior to release from incarceration.